

ISSUE SLIP STAPLE AREA (for additional cross references)

P S/N	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			13
FORMALITY REVIEW		875	12/26/00
RESPONSE FORMALITY REVIEW	26	1091	04/13/01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted 0 Objected

Claim	Final	Original	Date
1	✓	✓	1-3-02
2	✓	✓	1-3-02
3	✓	✓	1-3-02
4	✓	✓	1-3-02
5	✓	✓	1-3-02
6	✓	✓	1-3-02
7	✓	✓	1-3-02
8	✓	✓	1-3-02
9	✓	✓	1-3-02
10	✓	✓	1-3-02
11	✓	✓	1-3-02
12	✓	✓	1-3-02
13	✓	✓	1-3-02
14	✓	✓	1-3-02
15	✓	✓	1-3-02
16	✓	✓	1-3-02
17	✓	✓	1-3-02
18	✓	✓	1-3-02
19	✓	✓	1-3-02
20	✓	✓	1-3-02
21	✓	✓	1-3-02
22	✓	✓	1-3-02
23	✓	✓	1-3-02
24	✓	✓	1-3-02
25	✓	✓	1-3-02
26	✓	✓	1-3-02
27	✓	✓	1-3-02
28	✓	✓	1-3-02
29	✓	✓	1-3-02
30	✓	✓	1-3-02
31	✓	✓	1-3-02
32	✓	✓	1-3-02
33	✓	✓	1-3-02
34	✓	✓	1-3-02
35	✓	✓	1-3-02
36	✓	✓	1-3-02
37	✓	✓	1-3-02
38	✓	✓	1-3-02
39	✓	✓	1-3-02
40	✓	✓	1-3-02
41	✓	✓	1-3-02
42	✓	✓	1-3-02
43	✓	✓	1-3-02
44	✓	✓	1-3-02
45	✓	✓	1-3-02
46	✓	✓	1-3-02
47			
48			
49			
50			

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY